

# REQUEST FOR CLARIFICATION/INTERPRETATION

<b>TO:</b>	Name and Title: <b>Jannis Conselyea</b>	<b>FROM:</b>	Name and Title: <b>Peggy Moses</b>
	Organizational Unit: <b>DDP Program Support Bureau Chief</b>		Organizational Unit: <b>CDC</b>
	Address: <b>111 Sanders, Helena, Mt</b>		Address: <b>FT. Missoula</b>

1. TYPE OF REQUEST:  Follow-up to Verbal Request - Date of Verbal Request: \_\_\_\_\_  Written Request

2. STATEMENT OF QUESTION OR ISSUE: Can an ABAS or other adaptive behavior scale be used instead of a Vineland when determining DD eligibility or CWS eligibility?

3. ANSWER:

The 0208 Comprehensive Waiver and the 0371 Community Supports Waiver require that a Vineland II Adaptive Behavior Scale be used to determine eligibility.

References

  
 Approved and Issued by: \_\_\_\_\_  
 Date: 12-1-10

<b>STATE USE ONLY</b>	<b>4: DISTRIBUTION:</b> One Copy: _____ One Copy: _____ One Copy: _____ Additional Copies: <input type="checkbox"/> _____  Requestor Manual Coordinator Division Files	<b>5: FOLLOW-UP:</b> <input type="checkbox"/> To be issued as Bulletin to: _____ (Division Administrator) Manual. Expected Date of Issuance: _____ <input type="checkbox"/> A.R.M. Change <input type="checkbox"/> State Plan Change
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